



Kate Edmundson
Interim Executive Director

LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

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APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, December 4, 2006, in room 739 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi
Patricia Curry
Hon. Joyce Fahey
Ann E. Franzen
Susan F. Friedman
Helen A. Kleinberg
Dr. La-Doris McClaney
Rev. Cecil L. Murray
Sandra Rudnick

COMMISSIONERS ABSENT (Excused/Unexcused)

Daisy Ma
Wendy L. Ramallo
Adelina Sorkin
Dr. Harriette F. Williams

APPROVAL OF AGENDA

The agenda for the December 4, 2006, meeting was unanimously approved.

APPROVAL OF MINUTES

The minutes of the November 20, 2006, general meeting were approved as amended.

CHAIR'S REPORT

- All Commissioners are required to attend an ethics training session and submit a certificate of completion to the Commission office. The last session of the year will be held on December 20 from 9:00 to 11:00 a.m.

- Following the December 18 meeting, Commissioners will adjourn to the holiday luncheon at the Homegirl Café, courtesy of Commissioner Biondi.
- Department of Children and Family Services director Trish Ploehn will join the discussion of Commission committees planned for the chairs' meeting in January.
- Interviews for the Commission's executive director position will take place this coming Wednesday. Chair Kleinberg thanked Vice Chair Rudnick, Commissioner Williams, and Joanne Sturges from the Executive Office for serving on the panel.
- Chair Kleinberg thanked Susan Jakubowski and Kate Edmundson for seeing that Commissioner questions from the last meeting were collected and passed to the department for answers.

DIRECTOR'S REPORT

- Ms. Ploehn introduced Jennifer Hottenroth, the department's new assistant division chief over mentoring and education. Dr. Hottenroth has more than 18 years of experience in social welfare, having been with DCFS since 1990 and served as assistant regional administrator in the Alameda and Torrance offices. Most recently, she has overseen initiatives in the alternative and specialized programs section, and is a member of the domestic violence review board.
- Negotiations continue regarding the state's contribution to funding Title IV-E waiver implementation; minor flaws in the state's formula have been found, and another meeting has been requested. Discussions also continue with DCFS, the Probation Department, and the Chief Administrative Office on the programmatic elements of the plan. Probation has identified six priorities that mesh to a great extent with DCFS's seven priorities, and the departments are hoping to combine resources to realize savings that might be used immediately to achieve some of those goals.
- The department's management reorganization has been submitted to the Chief Administrative Office for approval, and Ms. Ploehn expects implementation to be complete sometime in January. Both the CAO and the five Board offices have expressed support for the additional position items being requested.
- The Kin-GAP (Kinship Guardianship Assistance Payment) program allows relative caregivers to see their children's cases closed out of the foster care system, yet still receive funding at the basic foster care rate. For children with special needs, or families needing child care services or specialized counseling, say, the basic rate falls short of subsidizing that assistance, and caregivers either resist leaving the system or must ask the court to order a higher rate. To encourage relatives to take these children, the Kin-GAP Plus program has been proposed to allow funding at a higher rate.

Unfortunately, the state has put the implementation of Kin-GAP Plus on hold, primarily because of questions around Medi-Cal eligibility. (Are children still eligible for Medi-Cal if they are no longer in the system? Should eligibility be periodically

examined?) Further barriers arise around the state's getting the right rules in place for offsetting child support payments, which are now sent directly to relatives.

Ms. Ploehn expressed her frustration at the delay in this program, since she had been counting on it as a significant way for children to leave the formal foster care system, thus freeing funds for reinvestment in other initiatives. During the wait, however, families continue to receive the services they need, and the court is not terminating jurisdiction. Ms. Ploehn will update Commissioners as the situation changes.

- As discussed at a previous meeting, Ms. Ploehn confirmed that department policy allows children brought into care to telephone their families, and, when it is appropriate and safe to do so, to have monitored visits with them prior to their court hearing. Recent discussions between deputy directors and regional administrators, however, found the implementation of these policies to be spotty. They will be reviewed with regional administrators, who will then reinforce them with their staffs, eliminating any confusion. Visitation protocols must be clear, so that even if the department lacks information on a family member, a monitored visit may be possible. (A phone call should also be defined as a completed communication with a family member, Commissioner Biondi added, since in some Probation environments, children are not permitted to try again if a first connection fails.) Chair Kleinberg thanked Ms. Ploehn for researching these very significant issues, and looks forward to a further report.
- Ms. Ploehn distributed her 2006–2007 MAPP (Management Appraisal and Performance Plan) goals, which each year serve as a guide for other DCFS managers to develop their own goals early in October, to be accomplished by the following September. The director's goals for this year are similar to those for last year, except that getting approval for the Title IV-E waiver has been replaced by implementing it. Other goals include measurable reductions in the number of children in foster care, the time children are in out-of-home care, abuse rates for children in relative and non-relative care, and the number of children in long-term foster care. A 'stretch' goal is one beyond what is thought doable, and its achievement is considered quite a feat.

Chair Kleinberg asked about the quality of the care being provided to children and families; those concerns seem intrinsic to these goals, yet could be emphasized more. Safety, permanency, and well-being are critical to all the department's actions, Ms. Ploehn said, and 'well-being' is woven through much of what it does. With Dr. Hottenroth's arrival, the development of the mentoring and education section will be a good first step toward addressing those issues more directly.

- At a previous meeting, Commissioners inquired about findings from the Permanency Partners Program (P3), and what had prevented children in long-term foster care from connecting with their parents earlier. Three situations were most common:
 - Parents with past substance abuse issues had gotten sober but assumed their children were lost to them; the department had ceased providing family reunification

services, and the parents had drifted away, often to establish other families. They were happy to be reunited with their children as fully functioning parents.

- Youth who went AWOL from placement often ran to a relative's home where they later forged a permanent legal relationship.
- Victims of domestic violence who escaped their batterers but lost contact with their children were sometimes found to be appropriate caregivers when located.

It's often difficult for people to get off drugs in the 18-month time period mandated by the child welfare system; individuals are sometimes not connected to treatment programs for six months or longer, despite their priority status for enrollment. The Title IV-E waiver's pre-detainment assessment for mental health, substance abuse, and domestic violence issues should help in this area, as should the systems navigators and increased resources paid for through the Mental Health Services Act. Chair Kleinberg expressed interest in learning how long it took the P3 'success stories' to get drug treatment, and what worked for them.

Probation youth in foster care or placed with relatives often return to their parents' home, Commissioner Biondi said, though payments to their ostensible caregivers continue. Do social workers ever make surprise visits to children, perhaps in the late afternoon, following school hours? Discussions with the union are in progress, Ms. Ploehn said, about possible staggered work schedules—noon to nine in the evening, for example, or Tuesday through Saturday—that would help social workers connect with children and caregivers alike. Surprise visits, Commissioner Fahey said, though often requested by the court, are usually objected to by the department because of the potential waste of time if social workers make the trip and the family is not there. Ms. Ploehn will find out if that is still the case.

Although social workers are mandated to talk to children out of the presence of their caregivers, many situations are not conducive to the child's confiding any problems. In addition, if the child's time with a social worker is limited to a single hour-long visit once a month, little chance exists for building a trusting relationship to begin with. Ideally, lower caseloads and effective visitation protocols will mean more time for social workers to spend with each child, and more time for children to spend with their siblings and family members.

- The chart Ms. Ploehn distributed of sibling groups in long-term foster care was found to have some faulty numbers. Commissioners asked her to find out how many sibling groups are placed together, since separating these children presents issues in terms both of resources and of visitation.

FOLLOW-UP ON CHILD DEATH STATISTICS

Cassandra Turner presented written responses to many of the questions posed by Commissioners when she last appeared before them, as well as charts breaking out 2004–2006 child deaths from drive-by shootings and gunshot wounds by the degree of DCFS

involvement—an open case, an open referral, a prior case, or a prior referral. Fatalities were also disaggregated by age and mapped by service planning area. (The figures do not include cases under the jurisdiction of the Probation Department unless the child had a history with DCFS as well.) The DCFS child abuse hotline also tracks child deaths and serious injuries, including those resulting from gang activity, and began making quarterly reports to the Board of Supervisors earlier this year.

Commissioner Friedman related some difficulties in getting an accurate tally of child deaths from the Sheriff's Department, although both Commissioner Biondi and Commissioner Fahey noted that the child death review committee of the Inter-Agency Council on Child Abuse and Neglect (ICAN)—on which the Sheriff's Department sits—reviews all child deaths brought to the county coroner, and does some level of investigation on each.

The vast majority of children killed in drive-by shootings were living in the home of a parent at the time, and Commissioners are concerned that the department may not be looking carefully at gang activity in its placement decisions, perhaps returning youth to areas or family environments where they are in danger. Also, as Commissioner Biondi pointed out, the comparatively large numbers of prior referrals—cases having only a fleeting connection to DCFS—may indicate situations in which not enough was done to ensure the child's safety. On the other hand, unless children are actually shot by a caretaker, parent, or sibling, these occurrences are mostly random. Bad things happen in bad neighborhoods, as Commissioner Fahey said, and the department would be on shaky ground if it removed children simply because it didn't like where their parents lived.

If children are in danger from their parents, Commissioner Curry stated, that's clearly a DCFS responsibility, but families living in bad areas is a bigger problem—one that society as a whole must address. She suggested that the Commission highlight the child death information with the Board of Supervisors, recommending community solutions. The countywide prevention plan, now in its final draft, seeks to provide those solutions, Vice Chair Rudnick said. If it is successful, it will fundamentally change the way communities are supported, with departments cooperating in providing all the necessary resources to keep neighborhoods and families' healthy—medical and mental health care, parks, jobs, housing, education, and so on.

Chair Kleinberg recommended keeping this issue alive through discussions with the Probation Department and ICAN.

PANEL DISCUSSION ON WORKING WITH PARENTS

Chair Kleinberg introduced representatives from three major agencies with a long history of working with the department and with parents—Dr. Herschel Swinger from Children's Institute, Inc.; Kathy Icenhower from SHIELDS for Families, Inc.; and Alex Morales from Children's Bureau.

Children's Institute sees its role as identifying and defending the strengths of parents, at the same time recognizing the challenges posed by their socio-cultural environment,

including poverty and its antecedents. As the organization has grown, it has had to develop programs and staff to address four specific areas:

- Many parents and families are monolingual Spanish-speakers.
- Work with parents doesn't automatically trickle down to their children, and work with children doesn't automatically trickle up to their parents. Successful interventions involve healthy relationships between the generations.
- Victims of child sexual abuse require specialized treatment.
- Many children are frightened by the intervention process itself, and the social workers, court appearances, and other unfamiliar experiences it entails.

Intervention is a long, involved process, Dr. Swinger said, that should have no 'graduation' as such. Even after families leave the public sector, services should be ongoing, and cost-effective ways exist of doing that.

SHIELDS also focuses on the entire family, having discovered during its initial efforts with family preservation that many mothers and fathers face the challenge of never having been properly parented themselves, and thus have no successful models to use with their own children. Despite this, many assets exist in areas where the organization works:

- Family ties are strong. Even though they may not know how to deal with them, these parents love their children, and tend to lose hope when their kids are removed.
- The church is the backbone of the majority of families, and that spiritual component is of prime importance.
- The resiliency and resourcefulness of individuals who support a drug habit, for instance, are skills that can be put to positive use.

Prevention offers the most promising platform for Children's Bureau to harness the strengths of the community, Mr. Morales stated, since problems abound in the areas it serves. The volume of calls reporting suspected child abuse remains constant at about 150,000 per year, half the area's children will not graduate high school, and levels of obesity, poverty, and unemployment are on the rise. Nonetheless, Mr. Morales said, families have much to offer and can be effective ambassadors to other families. Among the prevention activities that Children's Bureau sponsors are:

- A school/parent readiness association that involves 600 families, most of whom were initially recruited by other parents to participate in family night activities, play and learn groups, or parent co-ops
- Parent leadership councils and community action groups that have worked with local government to plant trees and perform neighborhood clean-ups

- Health education trainings in which parents pledge to replicate the curriculum and teach ten other families (supported by Children's Bureau-funded physicians and nurses)

Dr. Swinger urged work at all levels of prevention, with one of the biggest issues in primary prevention being the thousands of children in day care, as well as the lack of jobs and affordable housing in low-income areas. Parental involvement in children's lives is key, and in 1996, Children's Institute began a program for biological fathers, whose behavior is a major determinant in the outcomes of their children, especially in terms of gang involvement and staying in school. Of the \$118 million allocated nationwide for fatherhood programs as part of the welfare reform initiative, Children's Institute received \$1.5 million over five years to expand its program throughout Los Angeles County. Each participant is required to start another group in his neighborhood, thus promoting community-building in a profound sense.

One of the biggest struggles an agency faces, Ms. Icenhower said, is breaking the long-term cycle of problems in a family. Substance abuse, for example, can go back two to four generations, and housing, employment, and education are critical components of recovery. Simply stopping the drug use is not the answer: people must be given the tools to re-make their lives and care for their families once they're clean. SHIELDS has 26 programs to get families on their feet, including 126 units of housing for entire family units—the only organization in the U.S. providing whole-family housing, for whatever configuration of individuals that might mean to the family involved. Families (90 percent of whom have a history with DCFS) take 18 months to two years to complete the SHIELDS treatment program, but may remain in its housing for up to a year after that. They receive assistance in finding permanent housing, as well as in getting their Section 8 subsidized housing certificates, which can take up to three months.

Besides housing, SHIELDS offers vocational services, training programs for jobs with good salaries, help with establishing savings accounts, and an onsite child development center. As a condition of program completion, participants are required to earn a high school diploma. Because the entire family is involved from the beginning of treatment—the basis of SHIELDS's overall philosophy—seven of its programs have the highest success rate in the country (70 to 90 percent). Children who grew up there are now winning scholarships to Harvard and George Washington University, and are coming back both to volunteer and to work as youth counselors. Over 900 families form the current advisory and alumni group, and many are working with advocacy organizations. This year, nearly \$25 million in child welfare dollars has been set aside for family therapy, as well as \$17 million for the Substance Abuse and Mental Health Services Administration.

The next step for the nonprofit sector, Mr. Morales maintained, is to partner with the public sector to ensure that successful creative approaches are no longer confined to isolated organizations, but form the basis of innovative policy shifts. Areas in which Children's Bureau is active include:

- Universal intake, where individuals needing a variety of public services can be screened a single time
- Using community members as highly trained universal case managers instead of relying on sector-specific case management
- Simple online systems to qualify people for public benefits
- Locating banks in low-income communities to protect residents from the exploitive financial transactions that now persist
- Referring families with unsubstantiated abuse allegations to home-based services and activities that can build parent/child relationships and improve parenting skills

Though Dr. Swinger praised the inclusion of faith-based communities in public sector thinking, he also acknowledged the constraints it can present in terms of some funding. Financial restrictions in general remain a barrier to treating families, since one funding stream may provide mental health services only to the child, for instance, while another may target only the mother. RFPs often require collaboration among contracting agencies, Ms. Icenhower remarked, while true collaboration among public sector departments is virtually absent. Departments are not used to acknowledging that the families they serve don't have just a single problem, but need the support of three or four systems. DCFS has been a leader in collaboration, especially with the family preservation program, and has committed significant funding for discharge planning that is not covered by other funding sources. By contrast, agencies often struggle to work with the Department of Mental Health—the much-anticipated \$200 million expected from the state's Mental Health Services Act will provide only a small pot of money for new services—and encounter difficulties with the multidisciplinary assessment team (MAT) evaluations because of restrictions on EPSDT funds and the requirement of a 'medical necessity' diagnosis even for two-day-old babies. Combining and managing 45 or more different funding sources, each with its own account, conditions, reporting requirements, and issues, is often the only way agencies can accomplish their goals, but the process is complex and time-consuming. Some smaller agencies are shutting down because of these tensions, but none of the three panelists foresee the demise of grassroots efforts; contracts often call for partnerships with other agencies, and all organizations start small. Children's Bureau, for example, is part of ten different collaboratives, and serves as a pass-through for dollars that go to partners it has sought in disciplines outside its expertise.

It is cheaper and more effective for community-based organizations to provide services, Commissioner Biondi said, but if agencies doing a good job in the community don't connect with the public sector, RFP language may be released that community-based organizations can't possibly fulfill. DCFS is ahead of the curve in this regard, she continued, but other county departments must do a better job of supporting the high-quality work being done in the community. Recent interagency coordination within the county is a positive step, Dr. Swinger said, as is DCFS's outreach into communities and the possibil-

ity of its providing after-hours and weekend services. Funding restrictions, however, especially on services to undocumented individuals, remain a huge challenge.

Flexibility is critical, as is hammering out funding issues before contracts are finalized. Five different departments releasing five different RFPs on the same issue is not good; government agencies need to work together and build on each other's efforts. The configuration of the family preservation program, where prospective contractors sat down with DCFS ahead of time to agree on the program's structure, added greatly to its success. Keeping the process open enough so that everyone feels their organizations have an equal chance of landing the eventual contract can be tricky, but it can be done. With family preservation, in fact, communities chose the lead agencies even before applications were submitted, and the RFP process selected communities instead of agencies. Ms. Icenhower recommended site visits and interviews with people 'on the ground' when departments are choosing agencies to implement a program, since skilled grantwriters can gloss over deficiencies and overstate an organization's capabilities.

DCFS is ahead of other county departments in terms of its community-friendliness, Mr. Morales said, having worked hard to reduce child protection's stigma as an enemy to family unity, and to build its image as a resource to communities. As more county departments tie themselves to prevention efforts, they can give a further boost to that cultural change by offering activities and educational pieces to help families. The prevention initiative has tremendous potential for changes in public policy and spurring the government to look at new ways of doing business.

In all these efforts, Ms. Icenhower urged everyone to remember the individual families, whose composition and needs vary from community to community. Requiring agencies to treat all families alike, with evidence-based practices that have been developed elsewhere, is disturbing, since what works in North Carolina will not work in Compton. "One size definitely does not fit all," she said. Commissioner Biondi concurred, especially since many such programs warn that the slightest deviation from the research can be detrimental to the client. She agreed that funders need to be assured that what they're paying for is working, but the pendulum should not swing so far that university-based studies become the norm, squelching innovative treatment practices. New ways of assisting families must always be sought, Ms. Icenhower said, until each one is helped. The system can't get bogged down in requiring certain buzzwords or boilerplate language in its reports, or in repeating ineffective approaches, rather than learning from its mistakes.

Chair Kleinberg thanked the panelists, and said that the Commission would look forward to hearing from them another time.

MEETING ADJOURNED